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TITLE: Outreach to Faith Communities in New York State (NYS) for HIV Prevention

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ISSUE: HIV/AIDS has impacted the African-American and Latino communities in NYS disproportionately. In 1996 approximately 75% of new AIDS cases were among African Americans and Hispanics, groups comprising only 25% of the NYS population. New York's 12,000 registered faith communities are located among virtually all cultural/ethnic groups and influence the lives of even the hardest-to-reach populations. Clergy are respected as credible givers of information and guidance.

SETTING: Community-based organizations and faith communities in NYS.

PROJECT: Outreach to faith communities was initiated as a collaborative project between the NYS Department of Health AIDS Institute and the Racial/Ethnic Committee of the NYS HIV Prevention Planning Group. A Guide to *HIV/AIDS Education in Religious Settings* was developed to present factual information about HIV/AIDS. It explores issues concerning HIV/AIDS prevention in religious settings, provides materials and activities that can be used by local religious organizations, and provides an HIV/AIDS resource directory. The Guide was distributed by mail to all NYS faith communities. A survey was developed to examine resources, attitudes and barriers about HIV/AIDS education and information.

RESULTS: 16% of religious organizations indicated that they provided or facilitated HIV/AIDS related education and prevention services, while 49% indicated that they made referrals for such services. 35% of religious organizations offers no HIV/AIDS related services or referral for services. Differences in the provision of HIV/AIDS related services were observed by religious affiliation, racial/ethnic composition of the congregation, congregation size, geographic location, and other factors. Among those providing services, religious organizations offered a mean 2.5 HIV/AIDS related services. Information was gathered on commonly provided prevention activities.

LESSONS LEARNED: Surprisingly, 41% of religious organizations in high need areas, believed that the need for services was low. This appears to indicate an underestimation of relative need for HIV/AIDS related services by many religious organizations. A finding that 50% of the religious leaders indicated willingness to meet with prevention providers offers the promise of substantially increasing the overall impact that faith communities are having. Follow-up steps for reaching out to faith communities will also be presented.

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